Date:

	UNITED STATE	S DISTRICT COURT for the
	Central Dis	strict of California
OLIVER B. MIT	CHELL III,)
	L	ACV1903608-PJB-JAEX
Plaintiff		}
v. LYDIE L. HAZAN, M.D.; and	AXIS CLINICAL TRIALS	Civil Action No.
))
Defendan	t(s))
	SUMMONS II	N A CIVIL ACTION
To: (Defendant's name and address	LYDIE L. HAZAN, M.D.; a	nd AXIS CLINICAL TRIALS
	1636 Wilshire Blvd., Suite Los Angeles, CA 90017	200
P. 12 (a)(2) or (3) — you mus	service of this summons on ted States agency, or an offit t serve on the plaintiff an ar	you (not counting the day you received it) — or 60 days if you cer or employee of the United States described in Fed. R. Civ. aswer to the attached complaint or a motion under Rule 12 of ion must be served on the plaintiff or plaintiff's attorney,
If you fail to respond, You also must file your answe		e entered against you for the relief demanded in the complaint.
		CLERK OF COURT

Signature of Clerk or Deputy Clerk

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Civil Action No.

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (1))

was re	this summons for (name ceived by me on (date)	of individual and title, if any)					
,, 00 10	and on (auto)						
	☐ I personally served the	☐ I personally served the summons on the individual at (place)					
			on (date)	; or			
	☐ I left the summons at						
	, a person of suitable age and discretion who res						
	on (date)	, and mailed a copy to	to the individual's last known address; or				
	☐ I served the summon	s on (name of individual)		, who	is		
	designated by law to accept service of process on behalf of (name of organization)						
			on (date)	; or			
	☐ I returned the summo	ons unexecuted because		; 01	or		
	Other (specify):						
	My fees are \$	for travel and \$	for services, for a total of \$	0.00			
	I declare under penalty of	of perjury that this information	is true.				
ate:			Server's signature				
			Printed name and title				
			Server's address				

Additional information regarding attempted service, etc: